

**UTILITY
PATENT APPLICATION
TRANSMITTAL**
(Only for new non-provisional applications under 37CFR§1.53(b))

| | |
|--|---|
| Attorney Docket No. | DE0003.0492 |
| First Inventor or Application Identifier | Barss et al. |
| Title | SOLVENT-RESISTANT MICROPOROUS POLYBENZIMIDAZOLE MEMBRANES AND MODULES |
| Express Mail Label No. | EI915422075US |

1602 U.S. PTO
1607/22 06/27/03

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|--|---|--|--------------|
| APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small> | | Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 | |
| <p>1. <input checked="" type="checkbox"/> *Fee Transmittal Form (e.g. PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small></p> <p>2. <input checked="" type="checkbox"/> Applicant claims small entity status <small>See 37 C.F.R. 1.27</small></p> <p>3. <input checked="" type="checkbox"/> Specification [Total pages 26] <input type="text"/></p> <p>(preferred arrangement set forth below)</p> <ul style="list-style-type: none"> - Descriptive Title of the Invention - Cross References to Related Applications - Statement Regarding Federally Sponsored R&D - Reference to sequence listing, a table or a computer program listing - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (<i>if filed</i>) - Detailed Description - Claim(s) - Abstract of the Disclosure <p>4. <input type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Pages <input type="text"/>] <input type="checkbox"/></p> <p>5. Oath or Declaration [Total Pages <input type="text"/> 4] <input type="checkbox"/></p> <p>a. <input type="checkbox"/> Newly executed (original or copy)</p> <p>b. <input checked="" type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) <small>(for continuation/divisional with Box 17 completed)</small></p> <p>i. <input type="checkbox"/> Deletion of Inventor(s) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§1.53(d)(2) and 1.33(b)</small></p> <p>6. <input type="checkbox"/> Application Data Sheet; See 37 C.F.R. 1.76</p> | | | |
| <p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table, or Computer Program (Appendix)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small></p> <p>a. <input type="checkbox"/> Computer Readable Form (CRF)</p> <p>b. Specification Sequence Listing on <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies) or ii. <input type="checkbox"/> paper </p> <p>c. <input type="checkbox"/> Statement verifying identity of above copies</p> | | | |
| ACCOMPANYING APPLICATION PARTS | | | |
| <p>9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input checked="" type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small></p> <p>11. <input type="checkbox"/> English translation document (<i>if applicable</i>)</p> <p>12. <input type="checkbox"/> Information Disclosure Statement (IDS) /PTO 1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(should be specifically itemized)</small></p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small></p> <p>16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122 (b)(2)(B) (i) <small>Applicant must attach form PTO/SB/35 or its equivalent.</small></p> <p>17. <input checked="" type="checkbox"/> Other: PRELIMINARY AMENDMENT and CERTIFICATE OF MAILING BY EXPRESS MAIL NO. EI915422075US</p> | | | |
| <p>18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 C.F.R. 1.76.</p> <p><input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: 09/525,580 <small>Prior application information Example: Kim, Sun U.</small></p> <p>Group No./Art Unit 1723</p> <p>For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p> | | | |
| 17. CORRESPONDENCE ADDRESS | | | |
| <input checked="" type="checkbox"/> Customer Number or Bar Code Label <small>(Insert customer number or attach bar code label here)</small> | | 000152 <small>or <input type="checkbox"/> Correspondence address below</small> | |
| Name | | | |
| Address | | | |
| City | State | Zip Code | |
| Country | Telephone FAX | | |
| Name (print/ type) | Dennis E. Stenzel | Registration No. (Attorney/Agent) | 28,763 |
| Signature |  | | Date 6/27/03 |

FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37CFR 1.27

TOTAL AMOUNT OF PAYMENT **\$555**

| | |
|--------------------------|--------------------------|
| Complete if Known | |
| Application Number | Divisional of 09/525,580 |
| Filing Date | (concurrently herewith) |
| First Named Inventor | Barss et al. |
| Examiner Name | |
| Art Unit | |
| Attorney Docket No. | DES/0003.0492 |

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order Other None

Deposit Account

Deposit Account Number **03-1550**
Deposit Account Name Chernoff Vilhauer McClung & Stenzel

The Commissioner is authorized to: (check all that apply)

Charge fees indicated below Credit any overpayments

Charge any additional fee(s) during the pendency of this application

Charge any fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

| Large Entity | Small Entity | Fee Description | Fee Paid |
|-----------------------------------|---------------|---|----------|
| Fee Code (\$) | Fee Code (\$) | | |
| 1051 130 | 2051 | 65 Surcharge - late filing fee or oath | |
| 1052 50 | 2052 | 25 Surcharge-late provisional filing fee or cover sheet | |
| 1053 130 | 1053 | 130 Non-English specification | |
| 1812 2,520 | 1812 | 2,520 For filing a request for ex parte reexamination | |
| 1804 920* | 1804 | 920* Requesting publication of SIR prior to Examiner action | |
| 1805 1840* | 1805 | 1840* Requesting publication of SIR after Examiner action | |
| 1251 110 | 2251 | 55 Extension for reply within first month | |
| 1252 410 | 2252 | 205 Extension for reply within second month | |
| 1253 930 | 2253 | 465 Extension for reply within third month | |
| 1254 1,450 | 2254 | 725 Extension for reply within fourth month | |
| 1255 1,970 | 2255 | 985 Extension for reply within fifth month | |
| 1401 320 | 2401 | 160 Notice of Appeal | |
| 1402 320 | 2402 | 160 Filing a brief in support of an appeal | |
| 1403 280 | 2403 | 140 Request for oral hearing | |
| 1451 1,510 | 1451 | 1,510 Petition to institute a public use proceeding | |
| 1452 110 | 2452 | 55 Petition to revive - unavoidable | |
| 1453 1,300 | 2453 | 650 Petition to revive - unintentional | |
| 1501 1,300 | 2501 | 650 Utility issue fee (or reissue) | |
| 1502 470 | 2502 | 235 Design issue fee | |
| 1503 630 | 2503 | 315 Plant issue fee | |
| Total Claims 17 | -20** = 0 | = 18 = 0 | |
| Indep. Claims 3 | - 3* = 0 | = 84 = 0 | |
| Multiple Dependent YES | | 140 = \$140 | |
| Fee Paid | | | |
| Large Entity | Small Entity | Fee Description | |
| Fee Code (\$) | Fee Code (\$) | | |
| 1202 18 | 2202 9 | Claims in excess of 20 | |
| 1201 84 | 2201 42 | Independent claims in excess of 3 | |
| 1203 280 | 2203 140 | Multiple dependent claim, if not paid | |
| 1204 84 | 2204 42 | *Reissue independent claims over original patent | |
| 1205 18 | 2205 9 | *Reissue claims in excess of 20 and over original patent | |
| SUBTOTAL (2) | | \$140 | |
| Other fee (specify) | | | |
| *Reduced by Basic Filing Fee Paid | | SUBTOTAL (3) | \$40 |

**or number of previously paid, if greater. For reissues, see above.

SUBMITTED BY

Complete (if applicable)

Name (print type) Dennis E. Stenzel Registration No. 28,763 Telephone (503) 227-5631

Signature

Date

02/03

**CERTIFICATE OF MAILING BY
"EXPRESS MAIL"**

Express Mail No. EL915422075US

Date of Deposit: June 27, 2003

I hereby certify that the patent application attached hereto entitled **SOLVENT-RESISTANT MICROPOROUS POLYBENZIMIDAZOLE MEMBRANES AND MODULES**, Barrs et al., inventors, is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service on the date indicated above and is addressed to **MAIL STOP PATENT APPLICATION**, Commissioner for Patents, P.O. BOX 1450, Alexandria, VA 22313-1450.


Dwight Bergquist-Moody